

If yes, list the property address:_____

D. ANNUAL INCOME

Source	Applicant	Coapplicant	Other Household Members	Total
Salary				
Overtime Pay				
Commissions/Fees/Bonuses/Tips				
Interest/Dividends				
Income from Business/Rental				
Social Security/Pensions/etc.				
Unemployment/Worker's Comp.				
Alimony/Child Support				
Welfare Payments				
Other				
TOTAL				

E. LIABILITIES List outstanding debts including auto loans, credit cards, personal loans, student loans and all other loans.)

Type	Creditor's Name	Monthly Payment	Unpaid Balance	Due Date

Monthly Alimony/Child Support \$_____

F. HOUSEHOLD COMPOSITION (List all persons who will reside in the property to be purchased. Give the relationship of each member to the head of household.)

Member No.	Full Name	Relationship	Age	Social Security No.
1		Self		
2				
3				
4				
5				
6				

The information provided below is true and complete to the best of my/our knowledge. I/we consent to the disclosure of information for purposes of income verification for financial assistance under the Dutchess County First Time Homebuyer Program. I/we understand that any willful misstatement of material fact will be grounds for disqualification.

Applicant Date

Coapplicant Date

INFORMATION FOR HUD MONITORING PURPOSES - The following information is requested in order to monitor compliance with fair housing laws. You are not required to furnish this information. The County neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, the County may note the race and sex on the basis of visual observation or surname.

Race/National Origin:

____ American Indian or Alaskan Native
____ Black, Not of Hispanic Origin
____ Asian or Pacific Islander
____ Hispanic
____ White, Not of Hispanic Origin
____ Other (specify) _____

Sex: ____ Male ____ Female

FOR OFFICE USE ONLY

Household Size: ____
Annual Household Income: ____
Maximum Household Income: ____

Action Taken: ____ Approved
____ Rejected

Reviewer: _____ Title: _____
Date: _____

**COUNTY OF DUTCHESS
FIRST TIME HOMEBUYER
FINAL ELIGIBILITY APPLICATIONS**

A. BORROWER INFORMATION

1. Borrower's Name _____
2. Co-Borrower's Name _____

B. PROPERTY INFORMATION

1. Property Address _____
2. Purchase Price \$ _____
3. Downpayment given at contract signing \$ _____

C. GROSS MONTHLY INCOME

1. Borrower's Earnings.....\$ _____
2. Co-Borrower's Earnings.....\$ _____
3. Other household income _____ \$ _____
4. TOTAL MONTHLY INCOME\$ _____

D. ASSETS

<u>Type of Asset</u>	<u>Value</u>
Checking Account	\$ _____
Savings Account	\$ _____
_____	\$ _____
_____	\$ _____

Are additional First Time Homebuyer grants being provided? Yes/No
If yes, list the name of the program and the amount:

_____ \$ _____

E. ANTICIPATED MONTHLY HOUSING MORTGAGE

\$ _____

F. MISCELLANEOUS INFORMATION

1. Borrower's Attorney
Name: _____
Phone (____) _____ FAX (____) _____

G. CLOSING COSTS AND DOWNPAYMENT ELIGIBILITY WORKSHEET

Complete the attached Downpayment and Closing Cost Eligibility Worksheet. This form is also available as spreadsheet which will automatically calculate the amount of County funding. To complete the spreadsheet just fill in numbers 1-18 in the "Program Eligible Closing Costs" section and numbers 1, 4, 5, 6a and 6b in the "Eligibility Worksheet" section. The form with automatically calculate the shortage.

H. APPLICANT CERTIFICATION

I(We) certify that the above information is true, accurate and complete and that I(We) read the FIRST TIME HOMEBUYER PROGRAM GUIDELINES and that I(We) meet and understand these guidelines.

Name _____ Date ____/____/____

Name _____ Date ____/____/____

I. BANK CERTIFICATION

As the mortgage officer for this application I certify that this information is consistent with our information on the applicant.

Bank Name _____

Mortgage Officer's Name: _____

Mortgage Officer's Signature: _____

Phone: _____

Fax: _____

E-Mail: _____

J. RACE/ETHNICITY INFORMATION

The following information is requested to monitor compliance with fair housing. You are not required to furnish this information. The County may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, the County may note the race and sex on the basis of visual observation or surname.

Race/National Origin:

Sex:

____ American Indian/Alaskan Native

____ Male

____ Black, Not of Hispanic Origin

____ Female

____ Asian or Pacific Islander

____ Hispanic

____ White, Not of Hispanic Origin

____ Other (specify) _____

Application may be faxed to the County, Attn: Anne Saylor, at 486-3610. Original must be mailed for County files.

Dutchess County FTH Program		
Downpayment and Closing Cost Eligibility Worksheet		
Applicant Name:		
<u>Program Eligible Closing Costs*</u>		<u>Amount**</u>
1. Application Fee/Credit Report		\$
2. Appraisal Fee		\$
3. Bank's Attorney Fee		\$
4. Mortgage Insurance Premium/Reserves		\$
5. NYS Mortgage Tax		\$
6. Prepaid Interest		\$
7. Recording Fees		\$
8. Survey		\$
9. Tax Service Fee		\$
10. Title Insurance Premium		\$
11. Well Test (\$)/Flood Test (\$		\$
12. Inspection		\$
13. Septic Certification		\$
14. Borrower's Attorney Fee		\$
15. Points		\$
16. Tax Adjustment		\$
17. Bank Tax Escrow		\$
18. Other -		\$
19. Total		\$
<u>Eligibility Worksheet</u>		
<u>Acquisition Costs</u>		
1. Purchase Price		\$
2. Program Eligible Closing Costs		\$
3. Total Acquisition Costs (1+2)		\$
<u>Financing</u>		
4. Mortgage Amount		\$
5. Cash Deposit in Escrow		\$
6. a. Savings	\$	
b. 2 Months Reserves	\$	
c. Savings Contributed to Purchase (6a-6b)		\$
7. Total Financing Available (4+5+6c)		\$
<u>Financing Shortage/Overage (3-7)</u>		\$
*Fuel adjustment, homeowners insurance, excessive fees are ineligible		
** All amounts should be in whole dollars rounded down to the nearest dollar.		

